

Foster Family Home - Corrective Action Report

Provider ID: 1-560129

Home Name: Nerissa Cristobal, CNA

Review ID: 1-560129-10

91-709 Pohakupuna Road

Reviewer: Jackie Chamberlain

Ewa Beach HI 96706

Begin Date: 12/3/2020

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6(d)(1) CCFFH inspection made for a 3 bed re-certification. Corrective action report issued during CCFFH visit with corrective action plan due to CTA within 30 days of inspection

Foster Family Home Personnel and Staffing [11-800-41]

41.(b)(6) Comply with all applicable federal, state, and county laws, ordinances, rules, regulations, and regulatory requirements, including but not limited to statutes that prohibit discrimination against any person, on the grounds of race, color, national origin, religion, creed, sex, age, marital status, or handicap;

Comment:

41.(b)(6) Per DPP website, the home has 3 bedrooms, but physical count of bedroom is 8 bedroom (5 downstairs and 3 upstairs) The structure of the home does not meet this description. Possibly additions have been made without a building permit. There is also a boarded inside stair well with no proof of permit

Foster Family Home Records [11-800-54]


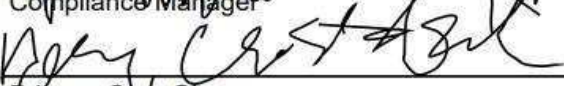
54.(c)(5) Medication schedule checklist;

54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

Comment:

54.(c)(5) Medication discrepancy for client # 2 and # 3— medication prescription label did not match medication administration record. CMA RN to perform immediate medication reconciliations and determine if a medication error has occurred. There is no December medication administration record for client # 1. For client # 2 there is no November or December MAR, and several medication discrepancies with medications possibly discontinued, or given an incorrect time or dose. Client # 3 NO MAR since April 2020. Unable to determine if correct medications are being administered

54.(c)(6) No evidence of Daily documentation of the provision of services for November and December


Compliance Manager

Primary Care Giver


Date 12/3/20

Date 12/3/20

CTA RN Compliance Manager:

Jackie Chamberlain, RN

**Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800**

PCG's Name on CCFFH Certificate:

Nerissa Q. Cristobal

(PLEASE PRINT)

CCFFH Address: 91-709 Pohakupuna Road Ewa Beach, HI 96706

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
41.(b)(6)	The Owner of the house did not have a copy of the blue print. Per Owner it was her husband (died) who manages all those documents. Per the Son, he also has no knowledge of the blue print. But per the DPP website all the permits were completed. Also, please see attached 3 bed certification from CTA [REDACTED]	12/05/2020	In the future, per Landlord's son the blue print will be readily available.
54.(c)(5) 54.(c)(6)	RN CM completed medication reconciliation for all clients. Obtained copies of orders from [REDACTED] and did clarification orders from client's PCP to ensure that all the medications are current and correct. Also, [REDACTED] has the orders for the medications that's being given. No medication error committed. All the orders are now filed, and up-to-date in the client's folders. Also, RN CM provided education, and counselling to [REDACTED] about getting the hard copy of the order following Telemedicine with the doctors and the missing MAR. Also provide education, and counselling about caregiver's daily documentations to all clients. Per [REDACTED] understood. Also, per [REDACTED] the MARs were completed, however, she has it in separate folders, and per [REDACTED] she was organizing her chart when CTA arrived at her home, and she was shocked and did know how to respond to CTA during that time.	12/05/2020	In the future, the client's chart will be organized. The MAR, medications orders, and daily documentations for each client will be readily available in the client charts.



All items that were fixed are attached to this CAP

PCG's Signature:

Nerissa Q. Cristobal

Date:

12/27/20

CTA has reviewed all corrected items